POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ELIZA		04-10-01
O.I.P.E. CLASSIFIER		49	5/2/01
FORMALITY REVIEW	S.H	1085	6/5/01
RESPONSE FORMALITY REVIEW	request	925	06-19-01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
−	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Best Available Copy

Claim Final	Original	Date								Claim Final	Original	Date								Claim Final	Original	Date							
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	2										52										102								
	3										53										103								
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If more than 150 claims or 10 actions
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